

AO 440 (Rev. 05/00) Summons in a Civil Action

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF ILLINOIS

SUMMONS IN A CIVIL CASE

Sandra Njos

CASE NUMBER: 07 C 50213

V.

ASSIGNED JUDGE:

Rockford Health System, an Illinois not-for-profit Corporation  
and Rockford Memorial Hospital, an Illinois not-for-profit  
Corporation, Robert Escarza M.D., Rhonda Casant, R.N.

DESIGNATED  
MAGISTRATE JUDGE:

TO: (Name and address of Defendant)

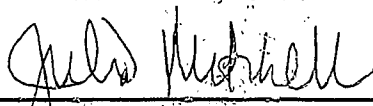
Julie A. Peterson  
Rockford Memorial Hospital  
2400 N. Rockton Avenue  
Rockford, IL 61103

**YOU ARE HEREBY SUMMONED** and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Cynthia Szymanski Koroll  
The Szymanski Koroll Litigation Group  
One Court Place, Suite 102  
Rockford, IL 61101

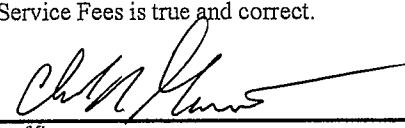
an answer to the complaint which is herewith served upon you, within 30<sup>1</sup>20 days after service of this  
summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the  
relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time  
after service.

MICHAEL W. DOBBINS, CLERK

  
\_\_\_\_\_  
(By) DEPUTY CLERK

10/30/07  
DATE

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RETURN OF SERVICE		
Service of the Summons and complaint was made by me <sup>(1)</sup>	DATE <u>10/31/07</u>	
NAME OF SERVER (PRINT) <u>Chad Gaines</u>	TITLE <u>Process Server</u>	
Check one box below to indicate appropriate method of service		
<input type="checkbox"/> Served personally upon the defendant. Place where served: _____  <input checked="" type="checkbox"/> Left copies thereof at the defendant's <sup>Corporation</sup> <del>dwelling house</del> or usual place of abode with a person of suitable age and discretion then residing therein. Name of person with whom the summons and complaint were left: <u>Nancy Harvey - Director of Claims - Risk Management Dept. Rockford Health System</u>		
<input type="checkbox"/> Returned unexecuted: _____   		
<input type="checkbox"/> Other (specify): _____   		
STATEMENT OF SERVICE FEES		
TRAVEL <u>—</u>	SERVICES <u>\$5.00</u>	TOTAL <u>\$5.00</u>
DECLARATION OF SERVER		
<p>I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.</p>		
Executed on <u>10/31/07</u> <div style="text-align: center;">Date</div>	<u></u> <div style="text-align: center;">Signature of Server</div>	
<u>P.O. Box 15206 Loves Park, IL 61132</u> <div style="text-align: center;">Address of Server</div>		

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.